

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Kinzinger for Congress

Full Name (Last, First, Middle Initial)

A. Alecia Webb-Edgington for Congress

Mailing Address PO Box 175948

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2012

City	State	Zip Code
Covington	KY	41017-5948

Amount of Each Disbursement this Period

2000

Transaction ID : B-E-15057

Purpose of Disbursement
Political Contribution: Contribution

011

Category/
Type

Candidate Name

Alecia D. Webb-Edgington

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: KY District: 04

Full Name (Last, First, Middle Initial)

B. Bobby Schilling For CongressMailing Address 367 Avenue Of The Cities
Suite D

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		25		2012

City	State	Zip Code
East Moline	IL	61244-4053

Amount of Each Disbursement this Period

2000

Transaction ID : B-E-15396

Purpose of Disbursement
Political Contribution: Contribution

011

Category/
Type

Candidate Name

Robert T. Schilling

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify)

State: IL District: 17

Full Name (Last, First, Middle Initial)

C. Denham For CongressMailing Address 2150 River Plaza Drive
Suite 150

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		31		2012

City	State	Zip Code
Sacramento	CA	95833-4131

Amount of Each Disbursement this Period

2000

Transaction ID : B-E-15144

Purpose of Disbursement
Political Contribution: Contribution

011

Category/
Type

Candidate Name

Jeff Denham

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: CA District: 10

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6000.00